

State of Colorado



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DATE: May 16, 2006

TO: Directly Affected Employees through Agency HR Administrators
American Federation of State, County, Municipal Employees
Colorado Association of Public Employees
Colorado Federation of Public Employees
Association of Colorado State Patrol Professionals

FROM: Karen Fassler, Total Compensation Manager

SUBJECT: Implementation of System Changes, JEL 06-03

The system changes indicated on the accompanying chart are approved for implementation. The effective date for each change is indicated on the attached "Summary of System Changes" chart. If the changes involve class descriptions and/or class placements, they are also included. Please provide this information to appointing authorities, directly affected employees, and any others in your agency who may need this information. Information is also available on the web at <http://www.colorado.gov/dpa/dhr>.

A table of pay grade changes as a result of individual class adjustments from the 2006 Annual Compensation Survey report is also included for information purposes. Please refer to Appendix C of that report on our web site for more information on those pay grade changes.

If you have any questions, please contact Compensation Unit staff at 303-866-2455.

SUMMARY OF SYSTEM CHANGES

JE Letter #: 06-03
Date of Letter: 5/16/06

Total Compensation Systems

* P = proposed; F = final (only F is to be entered into EMPL and ADS)

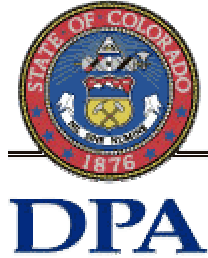
P or F*	CD Changes			Current Class		New Class		Occ Grp		Grade		Pay Diff.		Effective Date
	New	Rev	Abol	Code	Title (limit 25 characters)	Code	Title (limit 25 characters)	From	To	From	To	From	To	
F		X		E1A1XX	DENTIST I	C1H1XX	DENTIST I	MED	HCS	E10	C90	0	0	7/1/06
F		X		E1A2XX	DENTIST II	C1H2XX	DENTIST II	MED	HCS	E11 #	C91 #	0	0	7/1/06
F		X		E1A3XX	DENTIST III	C1H3XX	DENTIST III	MED	HCS	E12 #	C92 #	0	0	7/1/06
F		X		E2A1XX	PHYSICIAN I	C1J1XX	PHYSICIAN I	MED	HCS	E13 #	C93 #	0	0	7/1/06
F		X		E2A2XX	PHYSICIAN II	C1J2XX	PHYSICIAN II	MED	HCS	E15 #	C95 #	0	0	7/1/06
F		X		E3A1XX	PUB HLTH MED ADMIN I	C1K1XX	PUB HLTH MED ADMIN I	MED	HCS	E13 #	C93 #	0	0	7/1/06
F		X		E3A2XX	PUB HLTH MED ADMIN II	C1K2XX	PUB HLTH MED ADMIN II	MED	HCS	E14 #	C94 #	0	0	7/1/06
F		X		C5L1TX	THERAPY ASSISTANT I	C5L1TX	THERAPY ASSISTANT I	HCS	HCS	C28	C28	1	1	7/1/06
F		X		C5L2XX	THERAPY ASSISTANT II	C5L2XX	THERAPY ASSISTANT II	HCS	HCS	C32	C32	1	1	7/1/06
F		X		C5L3XX	THERAPY ASSISTANT III	C5L3XX	THERAPY ASSISTANT III	HCS	HCS	C36	C36	1	1	7/1/06
F		X		C5L4XX	THERAPY ASSISTANT IV	C5L4XX	THERAPY ASSISTANT IV	HCS	HCS	C38	C38	1	1	7/1/06

SSUING AUTHORITY: Colorado Department of Personnel and Administration Rev. 01/2002. # is designation for a salary lid class.

The table below lists those classes where individual class adjustments are being made based on the 2006 Annual Compensation Survey report, August 1, 2005, Appendix C. These changes are not the result of a system maintenance study but are published in this document for informational purposes only. These changes will also be effective July 1, 2006.

Class title	Class code	Pay Grade	
		7/1/05	7/1/06
Criminal Investigator Intern	A2A1IX	A32	A30
Criminal Investigator I	A2A2TX	A38	A36
Criminal Investigator II	A2A3XX	A44	A44
Criminal Investigator III	A2A4XX	A50	A50
Criminal Investigator IV	A2A5XX	A52#	A52#
Nurse I	C6S1XX	C47	C48
Nurse II	C6S2XX	C49	C53
Nurse III	C6S3XX	C53	C55
Mid-Level Provider	C6S4XX	C57	C59
Nurse V	C6S5XX	C62	C64
Nurse VI	C6S6XX	C67	C72
Diagnostic Procedures Tech I	C8A1TX	C27	C31
Diagnostic Procedures Tech II	C8A2XX	C33	C41
Diagnostic Procedures Tech III	C8A3XX	C42	C46
Diagnostic Procedures Tech IV	C8A4XX	C50	C55
Electrical Trades III	D6A3XX	D54	D57
Structural Trades III	D6D3XX	D46	D49
Equipment Mechanic I	D7A1TX	D34	D39
Equipment Mechanic II	D7A2XX	D42	D43
Equipment Mechanic III	D7A3XX	D44	D50
Equipment Mechanic IV	D7A4XX	D48	D53
General Labor I	D8D1TX	D26	D29
General Labor II	D8D2XX	D32	D33
Grounds & Nursery I	D8E1TX	D28	D35
Grounds & Nursery II	D8E2XX	D34	D38
Grounds & Nursery III	D8E3XX	D40	D44
Police Communications Tech	G1A2TX	G38	G41
Police Communications Supv	G1A3XX	G49	G52
Customer Support Coord Intern	G2C1IX	G44	G41
Customer Support Coord I	G2C2TX	G48	G45
Customer Support Coord II	G2C3XX	G52	G50
Data Entry Intern	G2D1IX	G20	G24
Data Entry Operator I	G2D2TX	G24	G27
Data Entry Operator II	G2D3XX	G30	G32
Administrative Assistant Intern	G3A1IX	G15	G22
Administrative Assistant I	G3A2TX	G22	G26
Administrative Assistant II	G3A3XX	G30	G34
Administrative Assistant III	G3A4XX	G38	G39
Legal Assistant I	H5E1XX	H31	H33
Legal Assistant II	H5E2XX	H37	H39
Civil Engineering Project Mgr I	I5C1**	I28	I32
Civil Engineering Project Mgr II	I5C2**	I32	I36

indicates a salary lid class



SYSTEM MAINTENANCE STUDY

NARRATIVE REPORT -- FINAL CHANGES

MED & HCS OCCUPATIONAL GROUP CONSOLIDATION

Conducted Fiscal Year 2005-2006

BACKGROUND AND PURPOSE OF STUDY

This system-wide study is part of the Department of Personnel and Administration's (hereafter "the department") statutory responsibility, CRS 24-50-104(1)(b), for maintaining and revising the system of classes covering all positions in the state personnel system. Such maintenance may include the assignment of appropriate pay grades that reflect prevailing wage as mandated by CRS 24-50-104(1)(a). The state personnel director has delegated authority for system studies to the Division of Human Resources (hereafter "the division").

The department's annual compensation survey is audited on a regular basis by an independent auditor through the State Auditor's Office and reported to the Legislative Audit Committee. In the last audit completed July 2005, it was recommended that the department reduce the number of occupational groups (Number 7). The department agreed to continue to evaluate the number of occupational groups. This study was initiated in order to ensure the appropriate number of occupational groups is currently being utilized. System studies are implemented on a "dollar for dollar" basis, which means employee salaries are not affected (up or down), unless they fall below a newly designated minimum rate.

ISSUES AND FINDINGS

The state personnel system currently has nine occupational groups. An occupational group is a grouping of job classes similar enough to be treated alike within the system. The Medical occupational group was identified for consolidation into the Health Care Services (HCS) occupational group.

The Medical occupational group contains three class series or occupations (Dentist, Physician, and Public Health Medical Administrator). The Medical group was originally created in order to accommodate the statutorily mandated medical pay plan for the three occupations.

The three class series within the Medical occupational group are very similar to jobs in the HCS group. Also, due to a lack of market survey data over the years for the jobs within the Medical group, the HCS occupational group annual compensation survey recommendation is used to recommend structure adjustments for the Medical group. The unique pay plan of the three Medical group occupations can be easily accommodated in the HCS group by using a separate subset of HCS pay grades, which will be created exclusively for these three class series. New pay grades (C90-C95) will be created in HCS to accommodate the higher maximums (all occupations in the Medical group require licensure as a physician or dentist and have a higher statutory lid value). All current pay grade values (minimum and maximum rates) used for the classes currently in the Medical group will be identical.

No class concepts are changing. There will be no fiscal impact and no impact to individual employee salaries, earning potential, or future salary survey recommendations.

MEET AND CONFER ON PROPOSED RESULTS

CRS 24-50-104(1)(b) requires the department to meet and confer with affected employees and employee organizations, if requested, regarding the proposed changes before they are implemented as final. The official notice of proposed changes contained a deadline by which all "meet and confer" activity must conclude in order to implement the recommendations on July 1, 2006. In an effort to proactively facilitate this process, a public meeting was scheduled for March 20, 2006. One employee from the Department of Labor and Employment and one employee from the Department of Personnel & Administration attended. No issues were communicated.

FISCAL IMPACT FOR IMPLEMENTATION YEAR

This study has no fiscal impact.

RECOMMENDATIONS

I. Occupational Group

All classes in the Medical occupational group will be placed in the Health Care Services occupational group. The Medical occupational group will be abolished. The new Health Care Services occupational group definition will be changed to the following.

HEALTH CARE SERVICES OCCUPATIONAL GROUP

DEFINITION: These occupations perform professional work concerned with the creative and conceptual application of theoretical and practical aspects of health care professions relating to humans or animals. Work involves care and treatment, prevention, intervention, or consultation in the fields of nursing, pharmacy, psychology, public health, rehabilitation, or veterinary medicine. Decision-making is related to the subject matter area, duties, and

consequence of action. Necessary knowledge and training is generally gained through completion of a college/university degree. Some occupations are licensed to practice medicine and perform professional work concerned with the diagnosis, prevention, and treatment of disease or injury in the fields of medicine, dentistry, or psychiatry, where necessary knowledge and training is gained through a post-baccalaureate degree and appropriate internship/residency. Included are supervisors, administrators, medical instructors, consultants, researchers and operating managers. Licensure may be required as prescribed by statute.

OR

These occupations perform technical, specialized work directly related to the diagnosis, treatment, and care of human or animal patients. The work requires the application of technical principles and manual skills obtained through specialized technical post-secondary education or on-the-job training. Licensure or certification may be required as prescribed by statute.

II. Class Descriptions

See attached.

III. Class Conversion

Class conversion is based on the movement from the former class title and grade to a new class title and grade for purposes of future reinstatement and retention. It is used for those studies that do not involve class placement. The recommended new class series' are:

Dentist, Physician, and Public Health Medical Administrator			
Class Code	Class Title	Occ. Group	Grade
C1H1XX	DENTIST I	HCS	C90
C1H2XX	DENTIST II	HCS	C91 #
C1H3XX	DENTIST III	HCS	C92 #
C1J1XX	PHYSICIAN I	HCS	C93 #
C1J2XX	PHYSICIAN II	HCS	C95 #
C1K1XX	PUB HLTH MED ADMIN I	HCS	C93 #
C1K2XX	PUB HLTH MED ADMIN II	HCS	C94 #



STATE OF COLORADO

CLASS SERIES DESCRIPTION

July 1, 2006

DENTIST

C1H1XX TO C1H3XX

DESCRIPTION OF OCCUPATIONAL WORK

This class series uses three levels in the Health Care Services Occupational Group and describes professional level work in the dental care and oral surgery field. Positions in this class series apply the principles, theories, and practices of dental science. By statutes C.R.S. 12-35-101 et. seq., a license is required in this class series.

Dentists provide professional diagnosis and treatment of oral pathology for patients in both routine and emergency settings. Dental care includes, but is not limited to, diagnostic, preventive, restorative, periodontal, endodontal, oral surgery, and prosthetic services. The work often involves providing instruction, demonstration, and training to other health care professionals and technologists; providing dental and procedural advice to other organizational units or health care specialties through consultation; and, providing professional advice to management for the development of dental treatment programs and standards for a state agency. Some dentists work in security settings where the positions follow policies and procedures to ensure the safety of themselves and others.

INDEX: Dentist I begins on page 1, Dentist II begins on page 3, and Dentist III begins on page 4.

DENTIST I

C1H1XX

CONCEPT OF CLASS

This class describes the fully-operational dentist. Duties require applying agency and professional treatment standards to develop individual patient treatment plans. Positions are assigned duties involving the diagnosis and treatment of oral pathology of patients. Dentists in this class plan their workloads and schedules as well as those of any subordinates, help maintain agency compliance with relevant statutes and professional standards in dentistry, refer patients to

CLASS SERIES DESCRIPTION (Cont'd.)

DENTIST

July 1, 2006

other specialists as needed, and provide input to supervisors on dental unit policies and procedures, dental treatment standards, and dental unit budgetary and staffing needs.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the process level, as described here. Within limits set by professional dental standards, the agency's available technology and resources, and dental program objectives and regulations established by a higher management level, choices involve determining the process, including designing the set of operations used to provide dental services to patients and to accomplish other related dental services. The general pattern, program, or system exists but must be individualized in order to apply to patient needs. This individualization requires analysis of patient data that is complicated, for example, by patient inability or unwillingness to cooperate. Analysis is breaking the patient's case into parts, examining these parts, and reaching conclusions that result in treatment processes. This examination requires the application of known and established dental theory, principles, conceptual models, professional dental standards, and precedents in order to determine their relationship to the patient's dental problem. New dental protocols, processes, or objectives require approval of higher management.

Complexity -- The nature of, and need for, analysis and judgment is patterned, as described here. Positions study patient information to determine what it means and how it fits together in order to get practical solutions in the form of a patient treatment plan. Guidelines in the form of agency protocols and professional dental treatment standards exist for most situations. Judgment is needed in locating and selecting the most appropriate of these guidelines which may change for varying patient circumstances as the assessment/diagnosis task is repeated. This selection and interpretation of guidelines involves choosing from alternatives where all are correct but one is better than another depending on the given circumstances of the situation.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of both of the following:

Detecting or discovering information or problems by interviewing or investigating where the dental issues or results of the contact are not known ahead of time. For example, a position interviews a patient to identify the source of intermittent pain.

Advising, counseling, or guiding the direction taken by patients to resolve their dental complaints or problems and influence or correct actions and behaviors. For example, a position counsels reluctant patients to convince them to follow the treatment plan.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as an individual contributor. The individual contributor may explain work processes and train others. The individual contributor may serve as a resource or guide by advising others on how to use processes within a system or as a member of a collaborative

CLASS SERIES DESCRIPTION (Cont'd.)

DENTIST

July 1, 2006

problem-solving team. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

DENTIST II

C1H2XX

CONCEPT OF CLASS

This class describes the work leader. In addition to the duties and responsibilities of a Dentist I, work leader positions are partially accountable for the work product of two or more full-time equivalent positions. This level may also include supervision of two, but less than three, full-time equivalent positions. The Dentist II differs from the Dentist I only on the Line/Staff Authority factor.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the process level, as described here. Within limits set by professional dental standards, the agency's available technology and resources, and dental program objectives and regulations established by a higher management level, choices involve determining the process, including designing the set of operations used to provide dental services to patients and to accomplish other related dental services. The general pattern, program, or system exists but must be individualized in order to apply to patient needs. This individualization requires analysis of patient data that is complicated, for example, by patient inability or unwillingness to cooperate. Analysis is breaking the patient's case into parts, examining these parts, and reaching conclusions that result in treatment processes. This examination requires the application of known and established dental theory, principles, conceptual models, professional dental standards, and precedents in order to determine their relationship to the patient's dental problem. New dental protocols, processes or objectives require approval of higher management or the agency with authority and accountability for the program or system.

Complexity -- The nature of, and need for, analysis and judgment is patterned, as described here. Positions study patient information to determine what it means and how it fits together in order to get practical solutions in the form of a patient treatment plan. Guidelines in the form of agency protocols and professional dental treatment standards exist for most situations. Judgment is needed in locating and selecting the most appropriate of these guidelines which may change for varying patient circumstances as the assessment/diagnosis task is repeated. This selection and interpretation of guidelines involves choosing from alternatives where all are correct but one is better than another depending on the given circumstances of the situation.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of both of the following:

CLASS SERIES DESCRIPTION (Cont'd.)

DENTIST

July 1, 2006

Detecting or discovering information or problems by interviewing or investigating where the dental issues or results of the contact are not known ahead of time. For example, a position interviews a patient to identify the source of intermittent pain.

Advising, counseling, or guiding the direction taken by patients to resolve their dental complaints or problems and influence or correct actions and behaviors. For example, a position counsels reluctant patients to convince them to follow the treatment plan.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as a work leader. The work leader is partially accountable for the work product of two or more full-time equivalent positions, including timeliness, correctness, and soundness. At least one of the subordinate positions must be in the same series or at a comparable conceptual level. Typical elements of direct control over other positions by a work leader include assigning tasks, monitoring progress and work flow, checking the product, scheduling work, and establishing work standards. The work leader provides input into supervisory decisions made at higher levels, including signing leave requests and approving work hours. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

DENTIST III

C1H3XX

CONCEPT OF CLASS

This class describes daily operational responsibility for a dental services unit, which commonly includes supervisory responsibility for dentists, dental technologists, and support staff. Duties require establishing and implementing policies and procedures for the dental services unit in an agency. Positions exercise full supervision and work will include planning, controlling, and reporting on the operational management of a dental services unit. Positions at this level are expected to apply the theories, principles, and concepts of dental science to the problems, programs, goals, and objectives of the agency in providing adequate dental care to patients. Positions at this level are expected to assure agency compliance with statutory and professional standards; assure coordination of dental services with the laboratory and other units or specialists; and advise management on dental protocols, treatment standards, and the dental services unit's budgetary and staffing needs. The distinguishing element of this class is operational responsibility for a dental services unit. The Dentist III differs from the Dentist II on the Decision Making, Complexity, and Purpose of Contact factors and may differ on the Line/Staff Authority factor.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the interpretive level, as described here. Within limits of the strategic master medical/dental plan and allocated human and fiscal resources, choices involve determining tactical plans to achieve the dental service objectives

CLASS SERIES DESCRIPTION (Cont'd.)

DENTIST

July 1, 2006

established by the higher management (strategic) level. Positions at this level are responsible, on a daily basis, for developing plans for an agency-wide dental services unit. This involves establishing what dental processes will be done, developing the budget, and developing the staffing patterns and work units in order to deploy staff. This level includes changing dental systems and guidelines that will be applied by others. By nature, this is the first level where positions are not bound by processes and operations in their own programs as a framework for decision making and there are novel or unique situations that cause uncertainties that must be addressed at this level. For example, the position develops special procedures to deal with uncooperative patients with a variety of health care problems in addition to their dental problems. Through deliberate analysis and experience with these unique situations, the manager determines the systems, guidelines, and programs for the future.

Complexity -- The nature of, and need for, analysis and judgment is formulative, as described here. Positions evaluate the relevance and importance of dental theories, concepts, and principles in order to tailor them to develop a different treatment approach, dental protocol, or tactical plan for the dental services unit to fit different types of patient circumstances. While general policy, precedent, or non-specific professional dental practices exist, they are inadequate so they are relevant only through approximation or analogy. In conjunction with dental theories, concepts, and principles, positions use judgment and resourcefulness in tailoring the existing dental guidelines so they can be applied to patient's circumstances and to deal with patient emergencies. For example, a position develops procedures for providing dental services to violent patients in a security facility.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of authorizing medical treatment protocols to be followed by others as a member of the agency's medical team setting dental protocols for the care of patients.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as a work leader, senior authority, or unit supervisor. The work leader is partially accountable for the work product of two or more full-time equivalent positions, including timeliness, correctness, and soundness. At least one of the subordinate positions must be in the same series or at a comparable conceptual level. Typical elements of direct control over other positions by a work leader include assigning tasks, monitoring progress and work flow, checking the product, scheduling work, and establishing work standards. The work leader provides input into supervisory decisions made at higher levels, including signing leave requests and approving work hours. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

OR

The unit supervisor is accountable, including signature authority, for actions and decisions that directly impact the pay, status, and tenure of three or more full-time equivalent positions. At least one of the subordinate positions must be in the same series or at a comparable conceptual level. The elements of formal supervision must include providing documentation to support

CLASS SERIES DESCRIPTION (Cont'd.)

DENTIST

July 1, 2006

recommended corrective and disciplinary actions, signing performance plans and appraisals, and resolving informal grievances. Positions start the hiring process, interview applicants, and recommend hire, promotion, or transfer.

OR

The senior authority is a pacesetter who has a unique level of technical expertise in a field or profession that, as part of the assignment, is critical to the success of an agency. It is an essential component of the work assignment that has been delegated by management to the position. This authority directly influences management decisions beyond the agency. Managers and peers seek this level of technical guidance and direction as the designer of a statewide system or in a subject area for other areas of state government. Managers and peers, both internally and externally to the agency, rely on this pacesetter when making decisions regarding the direction that policy, programs, and systems should take in the pacesetter's field of expertise.

ENTRANCE REQUIREMENTS

Minimum entry requirements and general competencies for classes in this series are contained in the State of Colorado Department of Personnel web site.

For purposes of the Americans with Disabilities Act, the essential functions of specific positions are identified in the position description questionnaires and job analyses.

CLASS SERIES HISTORY

Effective 7/1/06 (TLE). Medical Occupational Group consolidated into Health Care Services. No substantive changes to CD. Proposed 3/13/06.

Effective 9/1/93 (KAS). Job Evaluation System Revision project. Published as proposed 5/10/93.

Created 1/1/75.

SUMMARY OF FACTOR RATINGS

Class Level	Decision Making	Complexity	Purpose of Contact	Line/Staff Authority
Dentist I	Process	Patterned	Detect & Advise	Indiv. Contributor
Dentist II	Process	Patterned	Detect & Advise	Work Leader
Dentist III	Interpretive	Formulative	Authorize protocol	Work Leader, Senior Authority, or Unit Supervisor

ISSUING AUTHORITY: Colorado Department of Personnel & Administration



STATE OF COLORADO

CLASS SERIES DESCRIPTION

July 1, 2006

PHYSICIAN

C1J1XX TO C1J2XX

DESCRIPTION OF OCCUPATIONAL WORK

This class series uses two levels in the Health Care Services Occupational Group and describes professional level work in the field of medicine. Positions in this class series apply the principles, theories, and practices of medical science. By statutes C.R.S.12-36-101 et. seq., a license is required in this class series.

Physicians in these classes provide professional assessment, diagnosis and treatment for patients in both routine and emergency settings. Medical care includes, but is not limited to, conducting medical examinations, ordering and interpreting appropriate diagnostic tests and diagnosing medical problems, prescribing medications and treatment, and fostering preventive health care. The work often involves providing instruction, demonstration and training to other health care professionals and technologists; providing medical advice to other organizational units or health care specialties through consultation regarding patients or protocols; and providing professional advice to management for the development of medical programs, treatment standards and protocols for a state agency. Some physicians work in security settings where the positions follow policies and procedures to ensure the safety of themselves and others.

INDEX: Physician I begins on this page and Physician II begins on page 3.

PHYSICIAN I

C1J1XX

CONCEPT OF CLASS

This class describes the fully-operational physician. Duties require applying medical protocols and agency treatment standards to develop individual patient treatment plans. Positions are assigned duties involving the assessment, diagnosis and treatment of pathology of patients. Physicians are expected to plan their workloads and schedules as well as those of any subordinates; help maintain agency compliance with relevant statutes, professional standards in

CLASS SERIES DESCRIPTION (Cont'd.)

PHYSICIAN

July 1, 2006

medicine, and agency quality assurance standards; refer patients to other medical providers or facilities as needed; and provide input to supervisors on medical unit policies and procedures, medical protocols and treatment standards, and medical unit budgetary and staffing needs.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the process level, as described here. Within limits set by professional medical standards, the agency's available technology and resources, and medical program objectives and regulations established by a higher management level, choices involve determining the process, including designing the treatment process used to provide medical services to patients and to accomplish other related medical services work. The general pattern, program, or system exists but must be individualized. This individualization requires analysis of patient data that is complicated. Analysis is breaking the patient's problem or case into parts, examining these parts, and reaching conclusions that result in treatment processes. This examination requires the application of known and established medical theory, principles, conceptual models, professional standards, and precedents in order to determine their relationship to the problem. New medical protocols, processes or objectives require approval of higher management.

Complexity -- The nature of, and need for, analysis and judgment is patterned, as described here. Positions study patient information to determine what it means and how it fits together in order to get practical solutions in the form of a patient treatment plan. Guidelines in the form of agency protocols and professional treatment standards exist for most situations. Judgment is needed in locating and selecting the most appropriate of these guidelines which may change for varying patient circumstances as the assessment/diagnosis task is repeated. This selection and interpretation of guidelines involves choosing from alternatives where all are correct but one is better than another depending on the given patient's circumstances.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of both of the following:

Detecting or discovering information or problems by interviewing or investigating where the medical issues or results of the contact are not known ahead of time. For example, a position interviews patients to locate the source of a contagious disease.

Advising, counseling, or guiding the direction taken by patients to resolve complaints or medical problems. For example, a position counsels patients in order to convince them to follow the prescribed treatment plan.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as an individual contributor. The individual contributor may explain work processes and train others. The individual contributor may serve as a resource or guide by advising others on how to use processes within a system or as a member of a collaborative

CLASS SERIES DESCRIPTION (Cont'd.)
PHYSICIAN
July 1, 2006

problem-solving team. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

PHYSICIAN II

C1J2XX

CONCEPT OF CLASS

This class describes the fully-operational physician with work leader responsibilities or an acknowledged staff authority. In addition to the duties and responsibilities of a Physician I, work leader positions are partially accountable for the work product of two or more full-time equivalent positions. This class may also include supervision of two, but less than three, full-time equivalent positions. Staff authority positions are acknowledged by their peers and agency management as an authority in the area of professional medical work, commonly in one or more designated medical specialties. Staff authorities commonly are called upon for their expertise when agency management is establishing medical protocols. The Physician II may differ from the Physician I on the Complexity factor, and differs from the Physician I on the Purpose of Contact and Line/Staff Authority factors.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the process level, as described here. Within limits set by professional medical standards, the agency's available technology and resources, and medical program objectives and regulations established by a higher management level, choices involve determining the process, including designing the treatment process used to provide medical services to patients and to accomplish other related medical services work. The general pattern, program, or system exists but must be individualized. This individualization requires analysis of patient data that is complicated. Analysis is breaking the patient's problem or case into parts, examining these parts, and reaching conclusions that result in treatment processes. This examination requires the application of known and established medical theory, principles, conceptual models, professional standards, and precedents in order to determine their relationship to the problem. New medical protocols, processes or objectives require approval of higher management.

Complexity -- The nature of, and need for, analysis and judgment is patterned, as described here. Positions study patient information to determine what it means and how it fits together in order to get practical solutions in the form of a patient treatment plan. Guidelines in the form of agency protocols and professional treatment standards exist for most situations. Judgment is needed in locating and selecting the most appropriate of these guidelines which may change for varying patient circumstances as the assessment/diagnosis task is repeated. This selection and interpretation of guidelines involves choosing from alternatives where all are correct but one is better than another depending on the given patient's circumstances.

OR

CLASS SERIES DESCRIPTION (Cont'd.)
PHYSICIAN
July 1, 2006

The nature of, and need for, analysis and judgment is formulative, as described here. Positions evaluate the relevance and importance of medical theories, concepts, and principles in order to tailor them to develop a different treatment approach, medical protocol, or tactical plan for the medical unit to fit specific patient circumstances. While general policy, precedent, or non-specific medical practices exist, they are inadequate so they are relevant only through approximation or analogy. In conjunction with medical theories, concepts, and principles, positions use judgment and resourcefulness in tailoring the existing medical guidelines so they can be applied to particular patient circumstances and to deal with emergencies. For example, a position develops procedures for providing medical services to institutionalized patients with multiple medical problems.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of authorizing medical treatment protocols to be followed by others as a member of the agency's medical team setting medical protocols for the care of patients.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as a work leader or staff authority. The work leader is partially accountable for the work product of two or more full-time equivalent positions, including timeliness, correctness, and soundness. At least one of the subordinate positions must be in the same series or at a comparable conceptual level. Typical elements of direct control over other positions by a work leader include assigning tasks, monitoring progress and work flow, checking the product, scheduling work, and establishing work standards. The work leader provides input into supervisory decisions made at higher levels, including signing leave requests and approving work hours. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

OR

The staff authority is a pacesetter who has a unique level of technical expertise in a field or profession that, as part of the assignment, is critical to the success of an agency. It is an essential component of the work assignment that has been delegated by management to the position. This authority directly influences management decisions within an agency. For example, management relies on such a position when making decisions regarding the direction that policy or a program should take in the staff authority's field of expertise. Managers and peers recognize and seek this level of technical guidance and direction regarding the application of a program or system within the agency or to its clients.

ENTRANCE REQUIREMENTS

Minimum entry requirements and general competencies for classes in this series are contained in the State of Colorado Department of Personnel web site.

CLASS SERIES DESCRIPTION (Cont'd.)
PHYSICIAN
July 1, 2006

For purposes of the Americans with Disabilities Act, the essential functions of specific positions are identified in the position description questionnaires and job analyses.

CLASS SERIES HISTORY

Effective 7/1/06 (TLE). Medical Occupational Group consolidated into Health Care Services. No substantive changes to CD. Proposed 3/13/06.

Effective 9/1/93 (KAS). Job Evaluation System Revision project. Published as proposed 5/10/93.

Created 1/1/75.

SUMMARY OF FACTOR RATINGS

Class Level	Decision Making	Complexity	Purpose of Contact	Line/Staff Authority
Physician I	Process	Patterned	Detect & Advise	Indiv. Contributor
Physician II	Process	Patterned or Formulative	Authorize protocol	Work Leader or Staff Authority



STATE OF COLORADO

CLASS SERIES DESCRIPTION

July 1, 2006

PUBLIC HEALTH MEDICAL ADMINISTRATOR

C1K1XX TO C1K2XX

DESCRIPTION OF OCCUPATIONAL WORK

This class series uses two levels in the Health Care Services Occupational Group and describes physicians performing administrative work and medical consultation in the public health care field. Positions in this class use the principles, theories, and practices of medical science, preventive medicine, and public administration. By statutes C.R.S. 12-36-101 et. seq., a license is required in this class series.

Physicians in these classes administer a public health program. Administration includes, but is not limited to, establishing program objectives, developing and implementing program policies and procedures, leading or overseeing investigations and research projects related to public health, directing the activities of professionals and technologists and supervising program staff, coordinating and integrating public health program services with the work of other state and local government units and the private sector, and providing consultative services in an area of a public health or medical specialty. The work involves training physicians and other health care professionals and technologists, providing advice to physicians and other agency organizational units or health care specialties through consultation, and providing advice to management for the development of public health programs and programmatic goals and guidelines.

INDEX: Public Health Medical Administrator I begins on page 2 and the Public Health Medical Administrator II begins on page 3.

CLASS SERIES DESCRIPTION (Cont'd.)
PUBLIC HEALTH MEDICAL ADMINISTRATOR
July 1, 2006

PUBLIC HEALTH MEDICAL ADMINISTRATOR I

C1K1XX

CONCEPT OF CLASS

This class describes physicians having administrative and supervisory responsibility for a designated state public health program. Positions are assigned administrative duties involving program and budget development and staff supervision. Physicians in this class apply the theories, principles, and concepts of medical and public health science to the problems, programs, goals, and objectives of the agency. Duties require establishing specific policies, procedures, and operational plans to implement a designated public health program and to supervise assigned staff.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the interpretive level, as described here. Within limits of the strategic master agency plans and allocated human and fiscal resources, choices involve determining tactical plans to achieve the public health objectives established by the higher management level. Positions in this class are responsible, on a regular basis, for developing plans for a statewide public health program. This involves establishing what public health processes will be done, developing the budget, and developing the staffing patterns and work units in order to deploy staff. This level includes developing and/or changing public health programs and guidelines that may be applied by local public health officials statewide. By nature, this is the first level where positions are not bound by processes and operations in their own programs as a framework for decision making and there are novel or unique situations that cause uncertainties that must be addressed at this level. For example, a position develops a new program and funding source to provide training of local public health officials in an area of public health concern or emphasis, such as environmental toxicology. Through deliberate analysis and experience with these unique situations, the manager or expert determines the systems, guidelines, and programs for the future.

Complexity -- The nature of, and need for, analysis and judgment is strategic, as described here. Positions develop and disseminate guidelines to implement a public health program that maintains the agency's mission. Guidelines do not exist for most situations. For example, a position develops state guidelines for a disease or condition of public health importance for an epidemiology program. In directive situations, positions use judgment and resourcefulness to interpret circumstances in a variety of local and/or statewide situations and establish guidelines that direct how a departmental public health program will be implemented.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of both of the following:

Negotiating as an official representative of the department in order to obtain support or cooperation on public health issues where there is no formal rule or law to fall back on in

CLASS SERIES DESCRIPTION (Cont'd.)
PUBLIC HEALTH MEDICAL ADMINISTRATOR
July 1, 2006

requiring such action or change from the other party. Such negotiation has fiscal or programmatic impact on the department, local governments, physicians, and state residents. In reaching settlements or compromises with local government entities or private sector health facilities, a position does not have a rule or regulation to enforce but is accountable for the public health function, such as communicable disease control.

Defending, arguing, or justifying the agency's position and public health policies in formal hearings where the position is an official representative of one party. For example, presenting departmental arguments to the State Board of Health or the Colorado Medical Society.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as a unit supervisor. The unit supervisor is accountable, including signature authority, for actions and decisions that directly impact the pay, status, and tenure of three or more full-time equivalent positions. At least one of the subordinate positions must be in the same series or at a comparable conceptual level. The elements of formal supervision must include providing documentation to support recommended corrective and disciplinary actions, signing performance plans and appraisals, and resolving informal grievances. Positions start the hiring process, interview applicants, and recommend hire, promotion, or transfer.

PUBLIC HEALTH MEDICAL ADMINISTRATOR II C1K2XX

CONCEPT OF CLASS

This class describes physicians having administrative and second-level supervisory responsibility for a state public health program. Positions are assigned administrative duties involving program and budget development and staff supervision. Positions in this class apply the theories, principles, and concepts of medical and public health science to the problems, programs, goals, and objectives of the agency. Duties require establishing specific policies, procedures, and operational plans to implement a designated public health program and to supervise subordinate unit supervisors. The Public Health Medical Administrator II differs from the Public Health Medical Administrator I on the Line/Staff Authority factor.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the interpretive level, as described here. Within limits of the strategic master agency plans and allocated human and fiscal resources, choices involve determining tactical plans to achieve the public health objectives established by the higher management (strategic) level. Positions in this class are responsible, on a regular basis, for developing plans for a statewide public health program. This involves establishing what public health processes will be done, developing the budget, and developing the staffing patterns and work units in order to deploy staff. This level includes developing and/or changing public health programs and guidelines that may be applied by local public health officials statewide. By nature, this is the first level where positions are not bound by processes

CLASS SERIES DESCRIPTION (Cont'd.)
PUBLIC HEALTH MEDICAL ADMINISTRATOR
July 1, 2006

and operations in their own programs as a framework for decision making and there are novel or unique situations that cause uncertainties that must be addressed at this level. For example, a position develops a new program to fund the training of local public health officials in an area of public health concern or emphasis, such as environmental toxicology. Through deliberate analysis and experience with these unique situations, the manager or expert determines the systems, guidelines, and programs for the future.

Complexity -- The nature of, and need for, analysis and judgment is strategic, as described here. Positions develop and disseminate guidelines to implement a public health program that maintains the agency's mission. Guidelines do not exist for most situations. For example, a position develops state guidelines for a disease or condition of public health importance for an epidemiology program.. In directive situations, positions use judgment and resourcefulness to interpret circumstances in a variety of local and/or statewide situations and establish guidelines that direct how a departmental public health program will be implemented.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of both of the following:

Negotiating as an official representative of the department in order to obtain support or cooperation on public health issues where there is no formal rule or law to fall back on in requiring such action or change from the other party. Such negotiation has fiscal or programmatic impact on the department, local governments, physicians, and state residents. In reaching settlements or compromises with local government entities or private sector health facilities, a position does not have a rule or regulation to enforce but is accountable for the public health function, such as communicable disease control.

Defending, arguing, or justifying the agency's position and public health policies in formal hearings where a position is an official representative of one party. For example, presenting departmental arguments to the State Board of Health or the Colorado Medical Society.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as a manager. The manager must be accountable for multiple units through the direct supervision of at least two subordinate Unit Supervisors; and, have signature authority for actions and decisions that directly impact pay, status, and tenure. Elements of formal supervision must include providing documentation to support recommended corrective and disciplinary actions, second-level signature on performance plans and appraisals, and resolving informal grievances. Positions start the hiring process, interview applicants, and recommend hire, promotion, or transfer.

ENTRANCE REQUIREMENTS

Minimum entry requirements and general competencies for classes in this series are contained in the State of Colorado Department of Personnel web site.

CLASS SERIES DESCRIPTION (Cont'd.)
PUBLIC HEALTH MEDICAL ADMINISTRATOR
July 1, 2006

For purposes of the Americans with Disabilities Act, the essential functions of specific positions are identified in the position description questionnaires and job analyses.

CLASS SERIES HISTORY

Effective 7/1/06 (TLE). Medical Occupational Group consolidated into Health Care Services. No substantive changes to CD. Proposed 3/13/06.

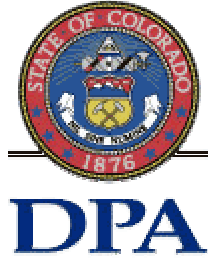
Effective 9/1/93 (KAS). Job Evaluation System Revision project. Published as proposed 5/10/93.

Revised 7/1/86. Updated class and deleted options.

Created 7/1/75.

SUMMARY OF FACTOR RATINGS

Class Level	Decision Making	Complexity	Purpose of Contact	Line/Staff Authority
Public Health Medical Admin I	Interpretive	Strategic	Negotiate & Defend	Unit Supervisor
Public Health Medical Admin II	Interpretive	Strategic	Negotiate & Defend	Manager



SYSTEM MAINTENANCE STUDY

NARRATIVE REPORT -- FINAL CHANGES

THERAPY ASSISTANT

Class Code C5L1TX through C5L4XX

Conducted Fiscal Year 2005-2006

BACKGROUND AND PURPOSE OF STUDY

This system-wide study is part of the Department of Personnel and Administration's (hereafter "the department") statutory responsibility, CRS 24-50-104(1)(b), for maintaining and revising the system of classes covering all positions in the state personnel system. Such maintenance may include the assignment of appropriate pay grades that reflect prevailing wage as mandated by CRS 24-50-104(1)(a). The state personnel director has delegated authority for system studies to the Division of Human Resources (hereafter "the division").

An error was realized in the class description for the Therapy Assistant. The purpose of this study was to correct the error.

ISSUES AND FINDINGS

During the HCS consolidation study of FY 00-01, the Therapy Assistant class description was originally proposed with three levels. Based on feedback and meet and confer activities, DPA agreed to add a fourth level (unit supervisor) similar to the prior Occupational/Physical Therapy Assistant IV class. This Therapy Assistant IV class was supposed to require supervision of at least one Therapy Assistant III level position. The final JEL (01-5) was published with the Concept of Class requiring supervision of at least one Therapy Assistant III position, but the Line/Staff (L/S) factor definition did not mention that it required supervising at least one Therapy Assistant III. It merely showed the standard "at least one in the series or at a comparable conceptual level".

Additionally, when the Therapy Assistant III class was carefully reviewed against the narrative, the current III also appeared inconsistent. The Therapy Assistant III Concept of Class allows individual contributors that write their own treatment plans to be placed at the III level, but the L/S factor does not mention individual contributor. L/S only mentions work leaders (erroneously) and unit supervisors of positions that do not write their own treatment plans.

This study corrected the class description for the Therapy Assistant III and IV to match the original intent of the series. The Therapy Assistant III was corrected to include individual contributor and remove the work leader in the L/S factor definition. The Therapy Assistant IV had the requirement of supervising at least one Therapy Assistant III added to the L/S factor definition.

These clarifications fix an error in the III and clarify the original intent of the IV, but do not change the originally published concept for these classes. No PDQ's were reviewed by DPA. It is recommended that affected departments evaluate any PDQ's at the next regular evaluation period to address any possible erroneous allocations due to the ambiguity or error.

MEET AND CONFER ON PROPOSED RESULTS

CRS 24-50-104(1)(b) requires the department to meet and confer with affected employees and employee organizations, if requested, regarding the proposed changes before they are implemented as final. The official notice of proposed changes contained a deadline by which all "meet and confer" activity must conclude in order to implement the recommendations on July 1, 2006. In an effort to proactively facilitate this process, a public meeting was scheduled for April 4, 2006. No employees attended the meet and confer and no issues were communicated to DPA.

FISCAL IMPACT FOR IMPLEMENTATION YEAR

This study has no fiscal impact.

RECOMMENDATIONS

I. Occupational Group

No change is recommended. These classes remain in the Health Care Services Occupational Group.

II. Class Descriptions

See attached.

III. Class Conversion and/or Placement

There is no class conversion or class placement. Positions will remain in their existing class.



STATE OF COLORADO
CLASS SERIES DESCRIPTION
July 1, 2006

THERAPY ASSISTANT

C5L1TX TO C5L4XX

DESCRIPTION OF OCCUPATIONAL WORK

This class series uses four levels in the Health Care Services Occupational Group and describes technical work in support of a therapy discipline. Technical work involves practical application of the practices and techniques of therapy but not the principles and theories which are applied by the therapist. Therapy assistants support the delivery of therapeutic treatment, habilitation, rehabilitation, and client instruction to an assigned client population under the supervision of a therapist. Some positions work in security settings where the positions follow policies and procedures to ensure the safety of themselves and others. Some positions may require registration or certification.

INDEX: Therapy Assistant I begins on this page, Therapy Assistant II begins on page 2, Therapy Assistant III begins on page 4, and Therapy Assistant IV begins on page 5.

THERAPY ASSISTANT I

C5L1TX

CONCEPT OF CLASS

This class describes the clearly defined level where positions follow established work processes and procedures. Positions operate within standard operations and alternatives that are known and any deviation from such requires prior approval. Some assignments do not move beyond this level.

CLASS SERIES DESCRIPTION (Cont'd.)

THERAPY ASSISTANT

July 1, 2006

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the defined level as described here. Within limits prescribed by the operation, choices involve selecting alternatives that affect the manner and speed with which tasks are carried out. These choices do not affect the standards or results of the operation itself because there is typically only one correct way to carry out the operation. These alternatives include independent choice of such things as priority and personal preference for organizing and processing the work, proper tools or equipment, speed, and appropriate steps in the operation to apply. By nature, the data needed to make decisions can be numerous but are clear and understandable so logic is needed to apply the prescribed alternative. Positions can be taught what to do to carry out assignments and any deviation in the manner in which the work is performed does not change the end result of the operation.

Complexity -- The nature of, and need for, analysis and judgment is prescribed as described here. Positions apply established, standard guidelines that cover work situations and alternatives. Action taken is based on learned, specific guidelines that permit little deviation or change as the task is repeated. Any alternatives to choose from are clearly right or wrong at each step.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication are for the purpose of exchanging or collecting information with contacts. This involves giving learned information that is readily understandable by the recipient or collecting factual information in order to solve factual problems, errors, or complaints.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as an individual contributor. The individual contributor may explain work processes and train others. The individual contributor may serve as a resource or guide by advising others on how to use processes within a system or as a member of a collaborative problem-solving team. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

THERAPY ASSISTANT II

C5L2XX

CONCEPT OF CLASS

This class describes full-operating therapy assistant. While the duties are similar to those performed at the lower level, the complexity of the job is different. The systems, operations, and processes are still established and defined but allow more flexibility and latitude in implementing treatment plans written by professional therapists. The work requires adapting practical approaches or routines for various situations. Not all circumstances are covered by established guidelines so positions must improvise solutions and alternatives. This class includes

CLASS SERIES DESCRIPTION (Cont'd.)

THERAPY ASSISTANT

July 1, 2006

responsibility for training lower level assistants. Therapy Assistant II differs from Therapy Assistant I on the Complexity factor and may differ on the Line/Staff Authority factor.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the defined level as described here. Within limits prescribed by the operation, choices involve selecting alternatives that affect the manner and speed with which tasks are carried out. These choices do not affect the standards or results of the operation itself because there is typically only one correct way to carry out the operation. These alternatives include independent choice of such things as priority and personal preference for organizing and processing the work, proper tools or equipment, speed, and appropriate steps in the operation to apply. By nature, the data needed to make decisions can be numerous but are clear and understandable so logic is needed to apply the prescribed alternative. Positions can be taught what to do to carry out assignments and any deviation in the manner in which the work is performed does not change the end result of the operation.

Complexity -- The nature of, and need for, analysis and judgment is patterned, as described here. Positions study information to determine what it means and how it fits together in order to get practical solutions to problems. Guidelines in the form of standard operating procedures, methods, and techniques exist for most situations. Judgment is needed in locating and selecting the most appropriate of these guidelines which may change for varying circumstances as the task is repeated. This selection and interpretation of guidelines involves choosing from alternatives where all are correct but one is better than another depending on the given circumstances of the situation.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication are for the purpose of exchanging or collecting information with contacts. This involves giving learned information that is readily understandable by the recipient or collecting factual information in order to solve factual problems, errors, or complaints.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as an individual contributor or work leader. The individual contributor may explain work processes and train others. The individual contributor may serve as a resource or guide by advising others on how to use processes within a system or as a member of a collaborative problem-solving team. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

OR

The work leader is partially accountable for the work product of two or more full-time equivalent positions, including timeliness, correctness, and soundness. At least one of the subordinate positions must be in the same series or at a comparable conceptual level. Typical elements of

CLASS SERIES DESCRIPTION (Cont'd.)

THERAPY ASSISTANT

July 1, 2006

direct control over other positions by a work leader include assigning tasks, monitoring progress and work flow, checking the product, scheduling work, and establishing work standards. The work leader provides input into supervisory decisions made at higher levels, including signing leave requests and approving work hours. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

THERAPY ASSISTANT III

C5L3XX

CONCEPT OF CLASS

This class describes positions with responsibility for writing patient treatment plans that are reviewed by professional therapists or for supervising therapy assistant positions responsible for implementing patient treatment plans. At this level, positions design and implement operations to accomplish the work. Work includes, but is not limited to, deciding what operations will be performed and how processes will be implemented. Therapy Assistant III differs from Therapy Assistant II on the Decision Making, Purpose of Contact and possibly Line/Staff Authority.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the operational level, as described here. Within limits set by the specific process, choices involve deciding what operation is required to carry out the process. This includes determining how the operation will be completed. By nature, data needed to make decisions are numerous and variable so reasoning is needed to develop the practical course of action within the established process. Choices are within a range of specified, acceptable standards, alternatives, and technical practices.

Complexity -- The nature of, and need for, analysis and judgment is patterned, as described here. Positions study information to determine what it means and how it fits together in order to get practical solutions to problems. Guidelines in the form of standard operating procedures, methods, and techniques exist for most situations. Judgment is needed in locating and selecting the most appropriate of these guidelines which may change for varying circumstances as the task is repeated. This selection and interpretation of guidelines involves choosing from alternatives where all are correct but one is better than another depending on the given circumstances of the situation.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of advising, counseling, or guiding the direction taken to resolve complaints or problems and influence or correct actions or behaviors.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as an individual contributor or unit supervisor. The individual contributor may explain work processes and train others. The individual contributor may serve as a resource or

CLASS SERIES DESCRIPTION (Cont'd.)

THERAPY ASSISTANT

July 1, 2006

guide by advising others on how to use processes within a system or as a member of a collaborative problem-solving team. This level may include positions performing supervisory elements that do not fully meet the criteria for the next level in this factor.

OR

The unit supervisor is accountable, including signature authority, for actions and decisions that directly impact pay, status, and tenure of three or more full-time equivalent positions. At least one of the subordinate positions must be in the same series or at a comparable conceptual level. The elements of formal supervision must include providing documentation to support recommended corrective and disciplinary actions, signing performance plans and appraisals, and resolving informal grievances. Positions start the hiring process, interview applicants, and recommend hire, promotion, or transfer.

THERAPY ASSISTANT IV

C5L4XX

CONCEPT OF CLASS

This class describes positions with unit supervisor responsibility that exercises direct, formal control over therapy assistants, of which at least one is responsible for writing their own client treatment plans. Therapy Assistant IV differs from Therapy Assistant III on Line/Staff Authority.

FACTORS

Allocation must be based on meeting all of the four factors as described below.

Decision Making -- The decisions regularly made are at the operational level, as described here. Within limits set by the specific process, choices involve deciding what operation is required to carry out the process. This includes determining how the operation will be completed. By nature, data needed to make decisions are numerous and variable so reasoning is needed to develop the practical course of action within the established process. Choices are within a range of specified, acceptable standards, alternatives, and technical practices.

Complexity -- The nature of, and need for, analysis and judgment is patterned, as described here. Positions study information to determine what it means and how it fits together in order to get practical solutions to problems. Guidelines in the form of standard operating procedures, methods, and techniques exist for most situations. Judgment is needed in locating and selecting the most appropriate of these guidelines, which may change for varying circumstances as the task is repeated. This selection and interpretation of guidelines involves choosing from alternatives where all are correct but one is better than another depending on the given circumstances of the situation.

Purpose of Contact -- Regular work contacts with others outside the supervisory chain, regardless of the method of communication, are for the purpose of advising, counseling, or

CLASS SERIES DESCRIPTION (Cont'd.)

THERAPY ASSISTANT

July 1, 2006

guiding the direction taken to resolve complaints or problems and influence or correct actions or behaviors.

Line/Staff Authority -- The direct field of influence the work of a position has on the organization is as a unit supervisor. The unit supervisor is accountable, including signature authority, for actions and decisions that directly impact pay, status, and tenure of three or more full-time equivalent positions. At least one of the subordinate positions must be in the Therapy Assistant III class or at a comparable conceptual level. The elements of formal supervision must include providing documentation to support recommended corrective and disciplinary actions, signing performance plans and appraisals, and resolving informal grievances. Positions start the hiring process, interview applicants, and recommend hire, promotion, or transfer.

ENTRANCE REQUIREMENTS

Minimum entry requirements and general competencies for classes in this series are contained in the State of Colorado Department of Personnel web site.

For purposes of the Americans with Disabilities Act, the essential functions of specific positions are identified in the position description questionnaires and job analyses.

CLASS SERIES HISTORY

Effective 7/1/06 (TLE). Clarification on L/S factor for the III and IV. Proposed 3/22/06.

Effective 7/1/01 (LLB). HCS Consolidation Study consolidated Clinical Therapy Assistant (C1B) and Occupational/Physical Therapy Assistant (C1F). Draft published 2/21/01, proposed 5/10/01, and final 7/1/01.

Effective 9/1/93 (KAS). Job Evaluation System Revision project. Converted Therapy Assistant (A5601-6) to Clinical Therapy Assistant (C1B). Created Occupational/Physical Therapy Assistant (C1F). Published as proposed 6/1/93.

Revised 7/1/90. Changed pay differential for Supervising Therapy Assistant (A5606).

Revised 1/1/89. Changed in-grade hire step.

Revised 9/1/88. Changed minimum qualifications and KSAs for Therapy Assistant IA - Therapy Assistant II (A5601-5). Changed pay grade for Therapy Assistant II (A5605).

Created 9/1/88. Supervising Therapy Assistant (A5606).

Created 1/1/75. Therapy Assistant (A5601-5)

CLASS SERIES DESCRIPTION (Cont'd.)**THERAPY ASSISTANT****July 1, 2006****SUMMARY OF FACTOR RATINGS**

Class Level	Decision Making	Complexity	Purpose of Contact	Line/Staff Authority
Therapy Assistant I	Defined	Prescribed	Exchange	Indiv. Contributor
Therapy Assistant II	Defined	Patterned	Exchange	Indiv. Contributor or Work Leader
Therapy Assistant III	Operational	Patterned	Advise	Indiv. Contributor, Unit Supervisor
Therapy Assistant IV	Operational	Patterned	Advise	Unit Supervisor

ISSUING AUTHORITY: Colorado Department of Personnel & Administration